

SEEC FORM 24

Referendum Expenditure Statement for an Entity
Using Existing Treasury Funds ONLY
(NOT Individuals or Committees)

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION



Do Not Mark in This Space For
Official Use Only

STATEMENT TYPE

- INITIAL
 AMENDMENT

SUMMARY PAGE

1. NAME OF ENTITY (BUSINESS ENTITY, ORGANIZATION, ASSOCIATION OR OTHER LEGAL ENTITY)					
2. NAME OF INDIVIDUAL DESIGNATED TO FILE REFERENDUM EXPENDITURE STATEMENTS					
Prefix	First	MI	Last	Suffix	Tel. & Email
3. MAILING ADDRESS OF ENTITY					
Street Address		City		State	Zip Code
4. REFERENDUM DATE (mm/dd/yyyy)	5. BRIEF DESCRIPTION OF REFERENDUM QUESTION			6. STATE OR POLITICAL SUBDIVISION	
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose			<input type="checkbox"/> State Question <input type="checkbox"/> Political Subdivision(s): (please specify) _____	
7. TYPE OF REPORT (Check One Box)					
<input type="checkbox"/> January 10 filing		<input type="checkbox"/> 7th day preceding referendum			
<input type="checkbox"/> April 10 filing		<input type="checkbox"/> 45 days following referendum			
<input type="checkbox"/> July 10 filing		<input type="checkbox"/> Amendment to			
<input type="checkbox"/> October 10 filing		Type of Report: _____			
8. PERIOD COVERED					
Beginning Date		Ending Date			
_____		thru _____			
9. CERTIFICATION					
I hereby certify and state, under penalties of false statement, that all of the information set forth on this Expenditure Statement is a true, accurate and complete itemization of the expenditures made or incurred by the Entity on whose behalf this form has been filed, for the period covered, to aid or promote the success or defeat of a referendum question; and I am a representative or agent of that Entity and have been duly authorized to complete and file this statement.					
_____ FILING AGENT'S SIGNATURE (SIGNATURE)		_____ PRINT NAME OF SIGNER		_____ DATE (mm/dd/yyyy)	
PENALTY FOR FALSE STATEMENT IS PUNISHABLE BY FINE NOT TO EXCEED \$1,000, OR IMPRISONMENT FOR NOT MORE THAN ONE YEAR, OR BOTH.					
			COLUMN A This Period	COLUMN B Aggregate	
10. Expenditures Made by Entity					
11. Expenses Incurred by Entity During this Period but NOT Paid					
12. Total Outstanding Expenses Incurred by Entity still Unpaid					

EXPENDITURES

NAME OF ENTITY	FILING DUE DATE

A. Expenditures Made by Entity

Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
SUBTOTAL This Page						

EXPENDITURES

NAME OF ENTITY	FILING DUE DATE

A. Expenditures Made by Entity

Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$
Name of Payee				Purpose of Expenditure (by code)	Date of Payment	Amount
Street Address	City	State	Zip Code			
Description						\$

SUBTOTAL This Page

Total of Additional Section Pages

TOTAL OF ALL EXPENDITURES MADE BY ENTITY (Enter Total on Line 10 of Summary Page)

EXPENDITURES

NAME OF ENTITY	FILING DUE DATE
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B. Expenses Incurred but Not Paid by Entity During this Period

Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$

Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$

Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$

Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$

Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$

Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$

Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$

Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$

SUBTOTAL This Page				

EXPENDITURES

NAME OF ENTITY	FILING DUE DATE
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B. Expenses Incurred but Not Paid by Entity During this Period

Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$
Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$
Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$
Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$
Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$
Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$
Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$
Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$
Name of Creditor		Date Incurred		Amount Incurred <i>(Estimate or Actual)</i>
Street Address	City	State	Zip Code	
Purpose of Expenditure (by code)	Description			
				\$
TOTAL OF ALL EXPENSES INCURRED DURING THIS PERIOD BUT NOT PAID				
<i>(Enter total on line 11 of Summary Page)</i>				
Previous Reported Expenses Unpaid and Still Outstanding				
Total of All Expenses Incurred But Not Paid				
<i>(Enter total on line 12 of Summary Page)</i>				

EXPENDITURES

NAME OF ENTITY	FILING DUE DATE
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C. Itemization of Reimbursements to Consultants and Workers

Last Name of Consultant/Worker	First	MI	Date of Payment	Method of Payment	Amount
Secondary Payee			Purpose of Expenditure (by code)	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Street Address	City		State	Zip Code	
Description					
					\$

Last Name of Consultant/Worker	First	MI	Date of Payment	Method of Payment	Amount
Secondary Payee			Purpose of Expenditure (by code)	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Street Address	City		State	Zip Code	
Description					
					\$

Last Name of Consultant/Worker	First	MI	Date of Payment	Method of Payment	Amount
Secondary Payee			Purpose of Expenditure (by code)	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Street Address	City		State	Zip Code	
Description					
					\$

Last Name of Consultant/Worker	First	MI	Date of Payment	Method of Payment	Amount
Secondary Payee			Purpose of Expenditure (by code)	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Street Address	City		State	Zip Code	
Description					
					\$

Last Name of Consultant/Worker	First	MI	Date of Payment	Method of Payment	Amount
Secondary Payee			Purpose of Expenditure (by code)	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Street Address	City		State	Zip Code	
Description					
					\$

Last Name of Consultant/Worker	First	MI	Date of Payment	Method of Payment	Amount
Secondary Payee			Purpose of Expenditure (by code)	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card	
Street Address	City		State	Zip Code	
Description					
					\$

SUBTOTAL This Page					
TOTAL of additional Section C Pages					
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE CONSULTANTS AND WORKERS					

CODED PURPOSES FOR EXPENDITURES

(Note: Asterisk * adjacent to the left of an Expenditure Code indicates that **Description Field** is **Mandatory**)

- Advertising** – Each expenditure code beginning with "A-" is to be used to identify the delivery method for paid advertising. Include the costs for *both* the **development and** the **delivery** of the message. A payment to a professional consultant to develop a message should be coded to the main advertising delivery method below, *not* as **Professional Consultant (CNSLT)**, which is a code that should only be used when no other expenditure code applies. If a single advertising message is developed for several of the delivery mechanisms listed below, use **A-OTH** for the cost of developing the message and then use the applicable code for the payments associated with the several delivery methods used. **Note:** The one **exception** to this advertising rule is when advertising content includes, as part of the message.
- A-DM**-expenditure to **advertise** through **direct mail**.
- A-MAG**-expenditure to **advertise** through a **magazine**.
- A-NEWS** –expenditure to **advertise** through a **newspaper**.
- A-ATM** - expenditure to advertise using an **automated telephone/fax message**, or an **automated telemarketing message**.
- A-PH-BNK**-expenditure for the use of **phone banks**, where people are speaking as distinguished from pre-recorded messages (above) and polls and surveys (below).
- A-RAD** –expenditure to **advertise** on **radio**.
- A-SIGN**-expenditure for the cost of preparing, printing, producing or distributing lawn or billboard **signs** visible from any street or highway.
- A-TV**–expenditure to **advertise** on **television**.
- A-WEB** –expenditure to advertise on the **World Wide Web**. This includes Webcasting (sending [audio](#) and/or [video](#) live over the [Internet](#)), or any other form of advertising on the web. See WEB for other web related expenditures.
- A-OTH** –any expenditure for any **other advertising**, not listed above, like the cost of (a) posters, stickers, streamers, banners, *etc.* for distribution on or in buildings or vehicles (i.e. cars, buses, boats, aircraft, etc.); (b) campaign paraphernalia, such as pins, hats, potholders, tee shirts and other campaign giveaway items; (c) audio messages and the cost of transmitting them by speakers from vehicles or buildings; (d) ad placed in ad books, in schools or civic organizations’ pamphlets or bulletins, or (e) ad books for fundraising events held by other committees.
- *ATT** – expenditure for **attendance fee or entrance fee** for any individual to a fundraiser held by a referendum committee or ongoing committee expending money in aid of or in opposition to the referendum. In the text box of the **Description Field**, which is **mandatory** under this expenditure category, identify the name and address of the individual who is attending the event as well as the date and location of the event and the name of the sponsoring committee or entity sponsoring the event.
- CNSLT** – expenditures to a professional **consultant**. Professional consultants are individuals or entities that are paid by the Entity as independent contractors for their professional advice. They are not salaried employees and they are not individuals who are serving the Entity as volunteers. Examples: management firms, public relations firms, lawyers and accountants, etc. However, for payments to professional consultants who design polls and surveys, or advertising messages, use the more specific code (ex. **A-DM, A-OTHR, POLLS**).
- CNTRB**- **expenditures** that are **contributions to another committee**. The expenditure of an Entity’s funds to make a contribution to a committee in aid of or opposition to a referendum.
- FOOD** - expenditures paid directly to a vendor for food and beverage.
- POLLS** - expenditures associated with **conducting polls and surveys**. This category is to be distinguished from **A-PH-BNK** (phone banks) because the information isn’t just delivered to the public but opinion is carefully being sought and collected from the public in some manner to produce a poll or survey result or report. If a professional consultant is both designing *and* conducting the poll or survey, uses **POLLS** as the expenditure code, not “**CNSLT**” (see above).
- POST**-expenditures for **postage**, such as stamps, bulk mail permits, post office boxes and envelopes, United Parcel Service, Federal Express, etc.
- PRNT**- expenditures associated with the costs of **printing**, photocopying or reproducing literature, stationery, invitations and the like.
- RCW** - Expenditures to reimburse Entity Consultants and Workers. This is when the cost of payment for something needed by the Entity is advanced by an individual **or entity** and reimbursement is sought and obtained from the Entity who authorized the payment within 45 days of receipt of the paid for item. Note: Absent reimbursement to the individual or entity within 45 days of receipt of the paid for item, the Entity would be receiving an in-kind contribution from that individual, which would require that the Entity form a political committee. Remember, if the Entity raises new funds (i.e., taking in contributions) to aid or promote the success or defeat of a referendum question, that Entity should not file this form but rather must first form a political committee and comply with all the filing requirements applicable to that committee. If, however, reimbursement is made properly to the individual, the Secondary Payee that appears on the payment slip of the individual must be reported by the Entity. Follow the instructions for “Itemization of Reimbursements to Consultants and Workers.”
- TRVL** - expenditures for an individual’s **transportation** costs and **lodging** authorized by the Entity or its agent, such as the cost of gasoline, other transportation fare, and lodging. The cost of **attending** any event should be coded as **ATT (Attendance)** (see above) and **any separate payment for food** outside the cost of the attendance fee should be coded as **FOOD**.
- WEB** – Expenditures for accessing and having a presence on the **WEB** solely for the purpose of this referendum. This includes payments to develop or maintain: (a) a web site; (b) an internet provider; (c) a domain name on the internet; (d) similar costs relating to the use of the internet. This is not to be used for any costs related to advertising on the web – see A-WEB above.
- *MISC** – expenditures of **Miscellaneous** items that are not listed above. The text box of the **Description Field**, which is mandatory in this situation, must explain in narrative form, with sufficient clarity, the purpose of this expenditure.